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ST. PAUL, MINNESOTA

# UNITED STATES DISTRICT COURT DISTRICT OF MINNESOTA

Vs.

NorthMemorial Hospital

Rubergony U. Vitas

Dr. Nathan Noznesky

Fairview University WorthHospital

EDr. Henry Buchwald

Case No. 4 CV 4562 DWHFLN
(To be assigned by Clerk of District Court)

DEMAND FOR JURY TRIAL

yes No

Defendant(s).

(Enter the full name(s) of ALL defendants in this lawsuit. Please attach additional sheets if necessary).

Amend

#### **PARTIES**

- 1. List your name, address and telephone number. Do the same for any additional plaintiffs.
  - a. Plaintiff

Name TANYA Renee LANGAMA
Street Address 5501 Boone Aue N#202
County, City Henneph, New Hope
State & Zip Code MN 55428
Telephone Number 612-207-4014

SCANNED

DEC 1 5 2014

U.S. DISTRICT COURT ST. PAU

- 2. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption.
  - a. Defendant No. 1

Name NOWN Memorial Hospital Street Address 3300 Oakdale Ave North County, City Hennepin, Robbinsdale State & Zip Code Minnesola, 55422

b. Defendant No. 2

Name Dr. Gregory Vilas

Street Address 33 66 bak date Are. Work #502'

County, City Hennepin, Rodoin sdale

State & Zip Code Minnesola: 55422

c. Defendant No. 3

Name Dr. Nathan Nozneku

Street Address 3300 Oak dale Aux North

County, City Hennepin, Robbin state

State & Zip Code Hinnesota 55422

NOTE: IF THERE ARE ADDITIONAL PLAINTIFFS OR DEFENDANTS, PLEASE PROVIDE THEIR NAMES AND ADDRESSES ON A SEPARATE SHEET OF PAPER. Check here if additional sheets of paper are attached: Please label the attached sheets of paper to correspond to the appropriate numbered paragraph above (e.g. Additional Defendants 2.d., 2.e., etc.)

Determinated Downland Filed 12/15/14 Page 3 of 6

VORMHOSPITAL

Name- Dr. Henry Buchwald, and their attornass at

Street address 701 Kenia Ave. South 1 Suite 500

Country Hennepin, Minneapolis

State & ZipCode. Minnesota 55416

#### **JURISDICTION**

Federal courts are courts of limited jurisdiction. Generally, two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount of damages is more than \$75,000 is a diversity of citizenship case.

3.	. What is the basis for federal court jurisdiction? (check all that apply)	
	Federal Question	Diversity of Citizenship
4.	If the basis for jurisdiction is Federal Question, which Federal Constitutional, statutory or treaty right is at issue? List all that apply.	
5.	If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party? Each Plaintiff must be diverse from each Defendant for diversity jurisdiction.	
	Plaintiff Name:	tate of Citizenship:
	Defendant No. 1:	State of Citizenship:
	Defendant No. 2:	State of Citizenship:
	Attach additional sheets of paper as necessary and label this information as paragraph 5.  Check here if additional sheets of paper are attached.	
6.	What is the basis for venue in the District of Minnesota? (check all that apply)	
	Defendant(s) reside in Other: explain	Facts alleged below primarily occurred in Minnesota

### STATEMENT OF THE CLAIM

Describe in the space provided below the basic facts of your claim. The description of facts should include a specific explanation of how, where, and when each of the defendants named in the caption violated the law, and how you were harmed. Each paragraph must be numbered On March 6, 2008 and again on March 7, th 2008. His failure to recommed warmed surgery led to my subsequent devasting complications. His treatment didnot meet the standard of gare required to fageneral subsequent with experience by Dr. Vitas. Then on March 6, 72008 Dr. No znesky hedorevaluated me and he failure to recommed urgery surgery area hedorevaluated me and he failure to recommed urgery surgery area hedorevaluated me and he failure to recommed urgery surgery area hedorevaluated me and he failure to recommed urgery surgery area hedorevaluated me and he failure to recommed urgery surgery area hedorevaluated me and he failure to recommed urgery surgery area hedorevaluated me and he failure to recommed urgery surgery area.

red to case of 14-10-84802-BWF9[N Bockment 4 Fired 12/15/14 Page 5 of 6 not meet the standard of care repulsed by agenous surge on with his experience separately, beginning with number 7. Please write each single set of circumstances in a The danard of careulas most meetby a general Surgeon. Itas & Dr. Nornesky didnot doct tuhen the Dr. Vitas & which would read to intestined to bloody stood which would read to intestined. 3 These complication's could have been advoided if the surgeon's would have elected surgery on the seconday. 10 Dr. Angstadd's appelared to opton appeared to Saliery Minn Stat. 458 1682, and establish the basis for aviable claim of medical negligered cagainst. Dr. Nornesky and Dr. Viters. B) It is therefore interests of justice tegrand Planiffs, motion to amend and the motion Ishee's of naner as now. Attach additional sheets of paper as necessary. Check here if additional sheets of paper are attached: Please label the attached sheets of paper to as Additional Facts and continue to number the paragraphs consecutively. REQUEST FOR RELIEF

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking. We court to pay close a Hetron to the flect's and hover sudge. Bruce a Rebason orders and forget and hover sudge. Bruce a Rebason orders and forget and hover sudge. Bruce a Rebason orders and forget and hover sudge. Bruce a Rebason orders and case. I would like to be compensation like as my train and be enached shared a do 25,000,000. This dome would be enached shared a fire that they took away from me with my kids and family.

Signed this 13th day of December

Signature of Plaintiff Sanga Renog Sanganes

Mailing Address 550 Boone Aren \$202

New Hope, MN 55425

Telephone Number 612-207-4014

<u>Note</u>: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide his/her mailing address and telephone number. Attach additional sheets of paper as necessary.